



TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number

09/981,313

Filing Date

October 15, 2001

First Named Inventor

Kristina Marie Burow

Group Art Unit

1743

Examiner Name

Arlen Soderquist

Total Number of Pages in This Submission

Attorney Docket Number

36-001100US

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	receipt acknowledgment postcard
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Authorization to Charge Deposit Account Please charge Deposit Account No. 50-0893 for any additional fees associated with this paper or during the pendency of this application, including any extensions of time for consideration of the documents enclosed.	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Jonathan Alan Quine, Reg. No. 41,261, Quine Intellectual Property Law Group, P.C.		
Signature			
Date	June 15, 2004		

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	Juliana Hermes		
Signature		Date	June 15, 2004



CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on June 15, 2004.

QUINE INTELLECTUAL PROPERTY LAW GROUP, P.C.

By: Juliana Hermes

Juliana Hermes

1743/81
IFW

Appl. No. : 09/981,313 Confirmation No. 4969
Applicant : Kristina Marie Burow, et al.
Filed : October 15, 2001
TC/A.U. : 1743
Examiner : Arlen Soderquist

Docket No. : 36-001100US
Customer No. : 22798
Client Ref No.: P0001US10

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Restriction Requirement mailed May 3, 2004, Applicants elect to prosecute Group I (claims 1-74) without traverse.

QUINE INTELLECTUAL PROPERTY LAW GROUP, P.C.
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Tel: 510 337-7871
Fax: 510 337-7877

Respectfully submitted,

Jonathan Alan Quine

Jonathan Alan Quine, J.D., Ph.D.
Reg. No: 41,261

Attachments:

- 1) A petition to extend the period of response for one months;
- 2) A transmittal sheet;
- 3) A receipt indication postcard.